

National Right to Life Political Action Committee

512 10th Street, N.W.

Washington

DC

20004-

FEC ID No. C00111278☒ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee**FEC IDENTIFICATION NUMBER****C** C00111278Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

725.04

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 17
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ZINGA, ANDREADisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 3434.75**Transaction ID: 61019.E13048**
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Amount

10556.24

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: NJ
☒ Senate District: 00
☐ PresidentialCheck One: ☐ Support ☒ OpposeName of Federal Candidate supported or Opposed by expenditure:
MENENDEZ, ROBERTDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought .00**Transaction ID: 61020.E13141**
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

11281.28

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Amount

1254.74

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: NJ
☒ Senate District: 00
☐ PresidentialCheck One: ☐ Support ☒ OpposeName of Federal Candidate supported or Opposed by expenditure:
MENENDEZ, ROBERTDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought .00Transaction ID: 61020.E13142
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2000.00

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop PrintingCategory/
TypeOffice Sought: ☐ House State: AZ
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KYL, JON LDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4601.18Transaction ID: 61019.E13059
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

3254.74

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
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24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C0011278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

959.24

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop ShippingCategory/
TypeOffice Sought: ☐ House State: AZ
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KYL, JON LDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4601.18Transaction ID: 61019.E13060
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1500.00

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop PrintingCategory/
TypeOffice Sought: ☐ House State: FL
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
HARRIS, KATHERINEDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4077.43Transaction ID: 61019.E13061
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

2459.24

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
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24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1500.00

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop PrintingCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 09
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BILIRAKIS, GUS MICHAELDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 995.55Transaction ID: 61019.E13063
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

413.87

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Li Drop ShippingCategory/
TypeOffice Sought: ☐ House State: FL
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
HARRIS, KATHERINEDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4077.43Transaction ID: 61019.E13062
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

1913.87

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
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24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1520.00

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop PrintingCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 20
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SHIMKUS, JOHN MDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 2964.20Transaction ID: 61019.E13065
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

435.15

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop ShippingCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 20
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SHIMKUS, JOHN MDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 2964.20Transaction ID: 61019.E13066
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

1955.15

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

413.87

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop ShippingCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 09
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BILIRAKIS, GUS MICHAELDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 995.55Transaction ID: 61019.E13064
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

730.44

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: FL
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
HARRIS, KATHERINEDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4077.43Transaction ID: 61020.E13088
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

1144.31

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee	FEC IDENTIFICATION NUMBER C C00111278
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Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

730.44

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintngCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 12
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SHAW, E. CLAY JR.Disbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 5797.20Transaction ID: 61020.E13090
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

86.74

Mailing Address
P.O. Box 75241
City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: FL
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
HARRIS, KATHERINEDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 4077.43Transaction ID: 61020.E13089
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

817.18

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1600.00

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit DropCategory/
TypeOffice Sought: ☒ House State: WA
☐ Senate District: 08
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
REICHERT, DAVEDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 9781.10Transaction ID: 61020.E13110
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

662.02

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit Drop ShippingCategory/
TypeOffice Sought: ☒ House State: WA
☐ Senate District: 08
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
REICHERT, DAVEDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 9781.10Transaction ID: 61020.E13111
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

2262.02

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

99.07

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: VA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ALLEN, GEORGEDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 32585.25Transaction ID: 61020.E13107
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1738.00

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: VA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ALLEN, GEORGEDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 32585.25Transaction ID: 61020.E13106
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

1837.07

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

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NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C0011278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

3056.25

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: PA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SANTORUM, RICHARD JDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 48406.01Transaction ID: 61020.E13104
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

174.21

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: PA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SANTORUM, RICHARD JDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 48406.01Transaction ID: 61020.E13105
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

3230.46

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :**FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee**FEC IDENTIFICATION NUMBER****C** C00111278Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2005.62

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: MI
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BOUCHARD, MICHAEL JDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 46082.68**Transaction ID: 61020.E13094**
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

114.32

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: MI
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BOUCHARD, MICHAEL JDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 46082.68**Transaction ID: 61020.E13095**
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

2119.94

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

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Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C0011278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1051.00

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: MD
☒ Senate District: 03
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
STEELE, MICHAELDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 42489.98Transaction ID: 61020.E13092
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

59.91

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: MD
☒ Senate District: 03
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
STEELE, MICHAELDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 42489.98Transaction ID: 61020.E13093
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

1110.91

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 13 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2004.75

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: MN
☒ Senate District: 00
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
KENNEDY, MARK RAYMONDCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7078.24Transaction ID: 61020.E13096
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

86.74

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 12
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
SHAW, E. CLAY JR.Check One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 5797.20Transaction ID: 61020.E13091
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

2091.49

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
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24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 14 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C0011278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

306.00

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Lit DropCategory/
TypeOffice Sought: ☐ House State: MN
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KENNEDY, MARK RAYMONDDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7078.24Transaction ID: 61020.E13098
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

114.27

Mailing Address
P.O. Box 75241
City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: MN
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KENNEDY, MARK RAYMONDDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7078.24Transaction ID: 61020.E13097
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

420.27

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

4358.50

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
S6 PrintngCategory/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ PresidentialCheck One: ☒ Support ☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 3264.00Transaction ID: 61020.E13102
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

248.43

Mailing Address
P.O. Box 75241
City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
S2 ShippingCategory/
TypeOffice Sought: ☐ House State: OH
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
DEWINE, RICHARD MICHAELDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 44208.49Transaction ID: 61020.E13103
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

4606.93

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 16 / 36
FOR LINE 24 OF FORM 3XNAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

122.71

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☐ House State: MO
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
TALENT, JAMES MATTHESDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 52656.60Transaction ID: 61020.E13100
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

38.22

Mailing Address
P.O. Box 75241
City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
Fed ExCategory/
TypeOffice Sought: ☐ House State: MI
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BOUCHARD, MICHAEL JDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 46082.68Transaction ID: 61020.E13101
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

160.93

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 17 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2152.75

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PrintingCategory/
TypeOffice Sought: ☐ House State: MO
☒ Senate District: 00
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
TALENT, JAMES MATTHESCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 52656.60Transaction ID: 61020.E13099
[MEMO ITEM]Full Name (Last, First, Middle, Initial) of Payee
Federal Express

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

156.20

Mailing Address
P.O. Box 371461City State Zip Code
Pittsburgh PA 15250-7461Purpose of Expenditure
ShippingCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 17
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
ZINGA, ANDREACheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 3434.75Transaction ID: 61019.E13046
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures

2308.95

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 18 / 36
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee			FEC IDENTIFICATION NUMBER C C0011278		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee EU Services			Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6		
Mailing Address P.O. Box 75241			Amount 77.15		
City Baltimore	State MD	Zip Code 21275-	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential		
Purpose of Expenditure Postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: BURNS, CONRAD			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: 61020.E13079		
Full Name (Last, First, Middle, Initial) of Payee EU Services			Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6		
Mailing Address P.O. Box 75241			Amount 802.55		
City Baltimore	State MD	Zip Code 21275-	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential		
Purpose of Expenditure Postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: BOUCHARD, MICHAEL J			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: 61020.E13077		

(a) SUBTOTAL of Itemized Independent Expenditures	879.70
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Amarie C. Natividad Signature	M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 19 / 36
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee	FEC IDENTIFICATION NUMBER C C00111278
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

861.40

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ Presidential

Name of Federal Candidate supported or Opposed by expenditure:

Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

3918.40

Disbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____

Transaction ID: 61020.E13078

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

77.15

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☒ House State: MT
☐ Senate District: 00
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
REHBERG, DENNIS RCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

8240.40

Disbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____

Transaction ID: 61020.E13080

(a) SUBTOTAL of Itemized Independent Expenditures

938.55

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 20 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

178.10

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: TN
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
CORKER, ROBERT P JRDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 47630.95

Transaction ID: 61020.E13081

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

802.20

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: MN
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KENNEDY, MARK RAYMONDDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7078.24

Transaction ID: 61019.E13032

(a) SUBTOTAL of Itemized Independent Expenditures

980.30

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 21 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1743.60

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
S2 PostageCategory/
TypeOffice Sought: ☐ House State: OH
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
DEWINE, RICHARD MICHAELDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 44208.49

Transaction ID: 61019.E13033

Full Name (Last, First, Middle, Initial) of Payee
EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1222.60

Mailing Address
P.O. Box 75241City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: PA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SANTORUM, RICHARD JDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 48406.01

Transaction ID: 61019.E13034

(a) SUBTOTAL of Itemized Independent Expenditures

2966.20

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 22 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C0011278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

695.30

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: VA
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ALLEN, GEORGEDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 32585.25

Transaction ID: 61019.E13035

Full Name (Last, First, Middle, Initial) of Payee

EU Services

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

420.30

City State Zip Code
Baltimore MD 21275-Purpose of Expenditure
PostageCategory/
TypeOffice Sought: ☐ House State: MD
☒ Senate District: 03
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
STEELE, MICHAELDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 42489.98

Transaction ID: 61020.E13075

(a) SUBTOTAL of Itemized Independent Expenditures

1115.60

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 23 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kaar-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

108.00

Mailing Address

750 Dewey Blvd

City

Butte

State

MT

Zip Code

59701-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☐ House

State: MT

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

BURNS, CONRAD

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13053

Calendar Year-To-Date Per Election

8278.22

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Kaar-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

108.00

Mailing Address

750 Dewey Blvd

City

Butte

State

MT

Zip Code

59701-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☒ House

State: MT

☐ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

REHBERG, DENNIS R

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13054

Calendar Year-To-Date Per Election

8240.40

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

216.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 24 / 36
FOR LINE 24 OF FORM 3XNAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kbob-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

330.00

City State Zip Code
Davenport IA 52803-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 17
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ZINGA, ANDREADisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 3434.75

Transaction ID: 61019.E13051

Full Name (Last, First, Middle, Initial) of Payee

Kbob-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

330.00

City State Zip Code
Davenport IA 52803-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: IA
☐ Senate District: 01
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
WHALEN, MICHAEL LOUISDisbursement For: ☐ Primary ☒ General 2004
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 8314.40

Transaction ID: 61019.E13052

(a) SUBTOTAL of Itemized Independent Expenditures

660.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 25 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kbsr-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

30.00

City State Zip Code
Hardin MT 59034-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☐ House State: MT
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BURNS, CONRADDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61020.E13082

Calendar Year-To-Date Per Election
for Office Sought 8278.22

Full Name (Last, First, Middle, Initial) of Payee

Kbsr-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

30.00

City State Zip Code
Hardin MT 59034-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: MT
☐ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
REHBERG, DENNIS RDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61020.E13083

Calendar Year-To-Date Per Election
for Office Sought 8240.40

(a) SUBTOTAL of Itemized Independent Expenditures

60.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kcle-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

960.00

Mailing Address
919 N. Main StCity State Zip Code
Cleburne TX 76033-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: TX
☐ Senate District: 17
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
TAYLOR, NICHOLAS VANCAMPENDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 3603.20

Transaction ID: 61019.E13055

Full Name (Last, First, Middle, Initial) of Payee
Khdn-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

30.00

Mailing Address
P.O. Box 230City State Zip Code
Hardin MT 59034-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☐ House State: MT
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BURNS, CONRADDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 8278.22

Transaction ID: 61020.E13084

(a) SUBTOTAL of Itemized Independent Expenditures

990.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 27 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Khdn-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

30.00

City State Zip Code
Hardin MT 59034-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: MT
☐ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
REHBERG, DENNIS RDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 8240.40

Transaction ID: 61020.E13085

Full Name (Last, First, Middle, Initial) of Payee

Kkjm-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

306.00

City State Zip Code
Sauk Rapids MN 56379-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☐ House State: MN
☒ Senate District: 00
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
KENNEDY, MARK RAYMONDDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7078.24

Transaction ID: 61019.E13036

(a) SUBTOTAL of Itemized Independent Expenditures

336.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kkjm-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

306.00

Mailing Address

1310 2nd Street N

City

Sauk Rapids

State

MN

Zip Code

56379-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☒ House

State: MN

☐ Senate

District: 06

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61020.E13086

Calendar Year-To-Date Per Election

1086.15

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Kruc-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

135.00

Mailing Address

1472 10th Street

City

Buffalo

State

MN

Zip Code

55313-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☐ House

State: MN

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13038

Calendar Year-To-Date Per Election

7078.24

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

441.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Kruc-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

135.00

Mailing Address
1472 10th StreetCity State Zip Code
Buffalo MN 55313-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: MN
☐ Senate District: 06
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
BACHMANN, MICHELE MDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 1086.15

Transaction ID: 61020.E13087

Full Name (Last, First, Middle, Initial) of Payee
WLVJ

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2881.50

Mailing Address
1601 Belvedere Rd.
#204ECity State Zip Code
W. Plam Beach FL 33406-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 12
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
SHAW, E. CLAY JR.Disbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 5797.20

Transaction ID: 61019.E13039

(a) SUBTOTAL of Itemized Independent Expenditures

3016.50

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Wafc-fm

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

720.00

Mailing Address

210 W, North Park

City

Okeechobee

State

FL

Zip Code

34972-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☒ House

State: FL

☐ Senate

District: 16

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13044

Calendar Year-To-Date Per Election

2035.70

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Wftl-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

2108.00

Mailing Address

6600 N. Andrews

City

Fort Lauderdale

State

FL

Zip Code

33309-

Purpose of Expenditure

Ad

Category/
Type

Office Sought:

☒ House

State: FL

☐ Senate

District: 12

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13040

Calendar Year-To-Date Per Election

5797.20

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2828.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 31 / 36
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER C C00111278	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Wina-am		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 344 Croyden		Amount 600.00	
City Roanoke	State VA	Zip Code 24013-	
Purpose of Expenditure Ad	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: ALLEN, GEORGE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____	
32585.25		Transaction ID: 61019.E13037	
Full Name (Last, First, Middle, Initial) of Payee Wkrs-am		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 3250 Belvidere Rd		Amount 540.00	
City Waukegan	State IL	Zip Code 60085-	
Purpose of Expenditure Ad	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: ROSKAM, PETER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____	
2860.80		Transaction ID: 61019.E13056	

(a) SUBTOTAL of Itemized Independent Expenditures	1140.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Amarie C. Natividad Signature	M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Wkrs-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

540.00

Mailing Address
3250 Belvidere RdCity State Zip Code
Waukegan IL 60085-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: IL
☐ Senate District: 08
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
MCSWEENEY, S. DAVIDCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13057

Calendar Year-To-Date Per Election
for Office Sought 2658.50

Full Name (Last, First, Middle, Initial) of Payee

Wnbf-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

1680.00

Mailing Address
50 Court StreetCity State Zip Code
Binghamton NY 13901-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: NY
☐ Senate District: 24
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
MEIER, RAYMONDCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13041

Calendar Year-To-Date Per Election
for Office Sought 3399.00

(a) SUBTOTAL of Itemized Independent Expenditures

2220.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 33 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Wokc-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

495.00

Mailing Address
947 Croyden DrCity State Zip Code
Dayton OH 45420-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: FL
☐ Senate District: 16
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
FOLEY, MARKCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61019.E13043

Calendar Year-To-Date Per Election
for Office Sought 2035.70

Full Name (Last, First, Middle, Initial) of Payee

Wpgb-fm

Date

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Amount

5400.00

Mailing Address
1685 Four Mile DriveCity State Zip Code
Williamsport PA 17701-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 04
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
HART, MELISSA A.Check One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____

Transaction ID: 61020.E13140

Calendar Year-To-Date Per Election
for Office Sought 7256.25

(a) SUBTOTAL of Itemized Independent Expenditures

5895.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 34 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER

C C00111278

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Wpht-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

6300.00

Mailing Address
Two Bala PlazaCity State Zip Code
Bala Cynwyd PA 19004-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 06
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
GERLACH, JIMDisbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7541.55

Transaction ID: 61019.E13029

Full Name (Last, First, Middle, Initial) of Payee

Wpht-am

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

6300.00

Mailing Address
Two Bala PlazaCity State Zip Code
Bala Cynwyd PA 19004-Purpose of Expenditure
AdCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 07
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
WELDON, CURTIS W.Disbursement For: ☐ Primary ☒ General 2004☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 7957.70

Transaction ID: 61019.E13030

(a) SUBTOTAL of Itemized Independent Expenditures

12600.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Amarie C. Natividad

Signature

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 35 / 36
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER C C00111278	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Wpht-am		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address Two Bala Plaza		Amount 6300.00	
City Bala Cynwyd	State PA	Zip Code 19004-	
Purpose of Expenditure Ad	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: FITZPATRICK, MICHAEL G		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____	
7673.25		Transaction ID: 61019.E13031	
Full Name (Last, First, Middle, Initial) of Payee Wthi-fm		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 918 Ohio Street		Amount 2652.00	
City Terre Haute	State IN	Zip Code 47807-	
Purpose of Expenditure Ad	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: HOSTETTLER, JOHN NATHAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____	
16782.10		Transaction ID: 61019.E13042	

(a) SUBTOTAL of Itemized Independent Expenditures	8952.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	89209.59
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Amarie C. Natividad Signature	M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6

Image# 26950630546

Form/Schedule: **F24** IE Memo for printing and shipping against Menendez will be disseminated today , 10-20-06. Memo for printing
Transaction ID: **C00111278** and shipping for Harris, Shaw, Steele, Bouchard, Kennedy, Talent, DeWine, Snatorum, Allen and Reicheirt was di-
sseminated on 10/19/06. adio ad will have a dissemination date of 10/30/06
